## **Fox Point Municipal Pool**

## **Refund Application**

| Name: _        |   |                    |
|----------------|---|--------------------|
| Address:       |   | Phone:             |
| Email: _       |   |                    |
| Please in      | dicate what you would like to be refunded for:  |                    |
| 0              | Swim Team (\$95)  |                    |
| 0              | Dive Team (\$95)  |                    |
| 0              | Water Ballet (95)   |                    |
| 0              | Swim Lessons (\$75) - Session #   |                    |
| 0              | Private Lessons (\$80)  |                    |
| 0              | Other:  |                    |
| Please gi      | ve a brief description explaining why you are rec   | questing a refund: |
|                |   |                    |
|                |   |                    |
|                |   |                    |
|                |   |                    |
|                |   |                    |
|                |   |                    |
|                |   |                    |
| approved       | are that there is a \$10 administrative fee associated by both pool management and the Village of Fourier are not guaranteed. |                    |
|                |   |                    |
| Signatur       | e:  | Date:              |
| Signatur       |   | Batc.              |
| Approve        | d by Pool Manager:  |                    |
|                |   | 5.                 |
| Signatur       | e:  | Date:              |
| <u>Approve</u> | d by Village of Fox Point:  |                    |
| Signatur       | ٠٠  | Date:              |